

**UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

NAJI MUHAMMAD, individually and as
Administratrix of the ESTATE of HAKIM
Jackson, Deceased,

Plaintiff,

v.

FORMER PENNSYLVANIA STATE POLICE
COMMISSIONER FRANK PAWLOWSKI, in his
individual capacities, et al.

Defendants.

CIVIL ACTION

No. 2:11-CV-05004-CDJ

Hon. C. Darnell Jones, II

JURY TRIAL DEMANDED

ORDER

AND NOW, this _____ day of _____, 2012, upon consideration of the Motion of Defendants Crozer-Chester Medical Center, Kristin Varacalli, M.D., Hussein Kiliddar, M.D., and Dawn Salvucci, R.N. For Leave To File Reply Regarding Motions To Dismiss [Docket Nos. 73 and 74], and any response thereto, it is hereby **ORDERED** that said Motion is **GRANTED**, and Moving Defendants are hereby granted leave of Court to file the Reply brief attached to its motion.

BY THE COURT:

C. Darnell Jones, II, U.S.D.J.

**UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

NAJI MUHAMMAD, individually and as
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v.

FORMER PENNSYLVANIA STATE POLICE
COMMISSIONER FRANK PAWLOWSKI, in his
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Defendants.

CIVIL ACTION

No. 2:11-CV-05004-CDJ

Hon. C. Darnell Jones, II

JURY TRIAL DEMANDED

**MOTION OF DEFENDANTS CROZER-CHESTER MEDICAL CENTER, KRISTIN
VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N. FOR
LEAVE TO FILE REPLY REGARDING MOTIONS TO DISMISS
[DOCKET NOS. 73 AND 74]**

Moving Defendants, CROZER-CHESTER MEDICAL CENTER, KRISTIN
VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N., by and
through their attorneys, Post & Schell, P.C., hereby respectfully request that this Honorable
Court, pursuant to its "Policies and Procedures: General Matters, Civil Cases, and Criminal
Cases (Revised September 30, 2011)" grant Moving Defendants leave to file a Reply to
Plaintiff's Oppositions to their Motions to Dismiss (Docket No. 73 and 74). Per the Court's
Policies and Procedures, a copy of the proposed Reply is attached hereto as Exhibit "A".

Moving Defendants request leave to file this Reply to specifically address Plaintiff's
opposition to their argument on the mistake requirement of Rule 15(c). None of the cases relied
upon by Plaintiff support Plaintiff's argument. Further, Plaintiff's opposition does not identify a
mistake by Plaintiff regarding Dawn Salvucci, R.N. Plaintiff seems to argue that a claimed lack
of knowledge regarding Dawn Salvucci constitutes his mistake; however, it is clear that Plaintiff

made a fully informed decision not to assert allegations against Dawn Salvucci, R.N. in the original pleading. The Reply will show there was no mistake based on "lack of knowledge" on the part of Plaintiff and that the case law relied upon by Plaintiff does not support the addition of Nurse Salvucci as a defendant when (1) she was never identified as a defendant before the expiration of the two-year statute of limitations, and received no notice of a claim or complaint against her before the statute of limitation expired, and (2) the relation back doctrine does not apply to Plaintiff's request to add Nurse Salvucci as a defendant in this case. With respect to all other arguments raised in their Motions to Dismiss, Moving Defendants rest on the strength of their moving papers.

WHEREFORE, Moving Defendants, CROZER-CHESTER MEDICAL CENTER, KRISTIN VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N., respectfully requests that this Honorable Court grant their motion for leave to file a Reply, and enter the attached form of order.

DATED: Jan. 20 2012

BY:



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SALVUCCI, R.N., and HUSSEIN
KILIDDAR, M.D.*

Exhibit “A”

(Proposed Reply Brief)

**UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

NAJI MUHAMMAD, individually and as
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Plaintiff,

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FORMER PENNSYLVANIA STATE POLICE
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individual capacities, et al.

Defendants.

CIVIL ACTION

No. 2:11-CV-05004-CDJ

Hon. C. Darnell Jones, II

JURY TRIAL DEMANDED

**REPLY OF DEFENDANTS CROZER-CHESTER MEDICAL CENTER, KRISTIN
VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N. IN
SUPPORT OF MOTIONS TO DISMISS [DOCKET NOS. 73 AND 74]**

Moving Defendants, CROZER-CHESTER MEDICAL CENTER, KRISTIN
VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N., by and
through their attorneys, Post & Schell, P.C., hereby submit a Reply in support of their Motions to
Dismiss [Docket Nos. 73 and 74].

Without providing any on point legal authority, Plaintiff asks this Court to allow claims
against a new defendant (Dawn Salvucci, R.N.) to relate back to the original Complaint based on
Rule 15(c), without Plaintiff making any initial mistake with respect to identifying that
defendant. Plaintiff's proposed approach would render Rule 15(c)(1)(C)(ii) entirely
meaningless.

Plaintiff's legal analysis fails to support his position. For example, Plaintiff focuses on
four cases to try and support his argument that Plaintiff may add a new party who was never
identified, designated, or named before the statute of limitations expired and suggests it routinely

happens. (See Plaintiffs' Opp. to Motion to Dismiss of CCMC, Varacalli and Salvucci at 13, citing *Brown v. City of Philadelphia*, 2010 U.S. Dist. LEXIS 44780 at *9 (E.D. Pa. 2010); *Advanced Power Systems, Inc. v. Hi-Tech Systems, Inc.*, 801 F.Supp. 1450, 1457 (E.D. Pa. 1992); *Taliferro v. Costello*, 467 F. Supp. 33, 34 (E.D. Pa. 1979) and *Heinly v. Queen*, 146 F.R.D. 102, 107 (E.D. Pa. 1993)). Plaintiff's reliance on these cases entirely misses the point. One of the cases even involves replacing a real party on behalf of a fictitious one.

In *Heinly*, *Taliferro*, and *Advanced Power Systems*, the mistake requirements were satisfied, but for reasons that do not apply in this case. See *Heinly*, 146 F.R.D. at 104, 107 (adding new identified police officer defendants in lieu of "John Doe Officers Q through Z"; mistake was misidentification); *Advanced Power Systems, Inc.*, 801 F.Supp at 1457 (proposed new parties were the owners of the sued corporation and plaintiff in the original case, and as a result had notice of lawsuit before expiration of the statute of limitations; new parties should have known error in legal judgment resulted in only company being initially sued); *Taliferro*, 467 F. Supp. at 36 (proposed defendant on notice that "joinder was a distinct possibility" prior to expiration of statute of limitations; mistake was "plaintiffs' failure to sue the City reflected a narrow view of their causes of action set forth in their Pro se compliant which probably would not have been taken has a lawyer familiar with the legal terrain drawn their first pleading.") These cases do not support Plaintiff's attempt to name a new defendant, Dawn Salvucci, who was (1) never identified by name, description, or designation as a party in the original complaint, (2) not given notice of a complaint against her before the expiration of the two year statute of limitations expired (August 16, 2011), and (3) clearly left out of this case deliberately by Plaintiff.

Unlike these cases, Ms. Salvucci was not misnamed in the Complaint through a fictitious defendant (as in *Heinly*), did not have notice of the lawsuit prior to the expiration of the statute of limitations (as in *Taliferro* and *Advanced Power Systems*), and did not know nor should she have known at that time that Plaintiff was really trying to initiate suit against her (as in *Taliferro* and *Advanced Power Systems*).

Plaintiff's reliance on *Brown* to support the instant addition of a new party defendant is especially misplaced, considering that this Court only held in *Brown* that "the notice requirement of Rule 15(c)(1)(C)(i) has not been met and Plaintiff's proposed amended complaint cannot relate back to the date of the original Complaint." *Brown*, 2010 U.S. Dist. LEXIS at *19. This Court never had a reason or opportunity to consider mistake upon finding that the separate and distinct notice requirement was not demonstrated.

Plaintiff also cites *Varlack v. SWC Caribbean, Inc.*, 550 F.2d 171, 175 (3d. Cir. 1977). Plaintiff argues this case supports his argument that "district courts do not examine whether the moving party made a literal mistake but rather focus on whether the newly-added party knew or should of known that the lawsuit was intended for him or her." (*See* Plaintiffs' Opp. to Motion to Dismiss of CCMC, Varacalli and Salvucci at 6.) Yet, Plaintiff points out that the Court reasoned that a fictitious defendant named "Unknown Employee" was named in the Varlack complaint, that the designation referred to the intended defendant, and from that designation the intended defendant knew Plaintiff intended to name him had plaintiff originally knew his identity. (*Id.*) In the instant matter, Plaintiff did not include such a designation in the original Complaint making a mistake of identity, and the intended defendant (Ms. Salvucci) did not have any reason to believe from the original complaint Plaintiff intended to sue her had he known her identity. Plaintiff's understanding of Varlack only supports the dismissal of Nurse Salvucci.

The Supreme Court's recent Rule 15 case, *Krupski v. Costa Crociere*, also fails to support Plaintiff's argument. ___ U.S. ___, 130 S. Ct. 2485, 177 L. Ed. 2d 48 (2010). In *Krupski*, the plaintiff sued the agent of the intended defendant, rather than the intended defendant, alleging it to be the owner, operator, manager, supervisor, and controller of a cruise vessel. *Id.*, 130 S. Ct. 2485 at 2490. The agent, however, was only a sales and marketing agent for the actual carrier and vessel operator, and notified plaintiff of same. *Id.* at 2491. The Supreme Court found that the mistake requirement was satisfied because the plaintiff made a mistake as to the intended defendant's identity (the owner) and, as a result, sued the wrong party. *Id.* at 2494. **In the instant matter, Plaintiff did not sue any person under a mistaken impression they were suing Ms. Salvucci.**

Plaintiff also relies on the Honorable Timothy J. Savage's opinion in *Siciliano v. City of Philadelphia*, 2010 U.S. Dist. LEXIS 78658 (E.D. Pa. 2010). (See Plaintiffs' Opp. to Motion to Dismiss of CCMC, Varacalli and Salvucci at 7-8.) Plaintiff's reliance on *Siciliano* is also flawed. In *Siciliano*, a post-*Krupski* case, plaintiff wanted to add six Philadelphia policemen as defendants and avoid the statute of limitations through the relation back doctrine. Central to Judge Savage's decision was the fact that "all of these officers whom the Scilianos seek to add as defendants had notice of the allegations within two years of the incident, that is, prior to the expiration of the statute of limitations." *Siciliano*, 2010 U.S. Dist. LEXIS 78658 at *3-4 and *6. That is not the case here.

The Supreme Court has made sure to clarify the limits of its decision in *Krupski* by reconciling its previous holding with in *Nelson v. Adams USA, Inc.*, 529 U.S. 460, 120 S. Ct. 1579, 146 L. Ed. 2d 530 (2000). The Supreme Court explained:

Contrary to respondent's claim, Nelson does not suggest that Rule 15(c)(1)(C)(ii) cannot be satisfied if a plaintiff knew of the

prospective defendant's existence at the time she filed her original complaint. **In that case, there was nothing in the initial pleading suggesting that Nelson was an intended party, while there was evidence in the record (of which Nelson was aware) that Adams sought to add him only after learning that the company would not be able to satisfy the judgment.** This evidence countered any implication that Adams had originally failed to name Nelson because of any "mistake concerning the proper party's identity," and instead suggested that Adams decided to name Nelson only after the fact in an attempt to ensure that the fee award would be paid. The footnote merely observes that Adams had originally been under **no misimpression** about the function Nelson played in the underlying dispute. **We said, after all, that Adams knew of Nelson's "role" as well as his existence.** Read in context, the footnote in Nelson is entirely consistent with our understanding of the Rule: **When the original complaint and the plaintiff's conduct compel the conclusion that the failure to name the prospective defendant in the original complaint was the result of a fully informed decision as opposed to a mistake concerning the proper defendant's identity, the requirements of Rule 15(c)(1)(C)(ii) are not met.** This conclusion is in keeping with our rejection today of the Court of Appeals' reliance on the plaintiff's knowledge to deny relation back.

Krupski, 130 S. Ct. 2485 at 2495-96 (internal citations omitted). *See also Garvin v. City of Philadelphia*, 354 F.3d 215, 221-22 (3d. Cir. 2003) ("Of course, an amended complaint will not relate back if the plaintiff had been aware of the identity of the newly named parties when she filed her original complaint and simply chose not to sue them at that time.") Plaintiff's opposition does not identify a mistake by Plaintiff regarding Dawn Salvucci, R.N., but it seems Plaintiff is trying to argue that Plaintiff did make a mistake for purpose of Rule 15(c) because Plaintiff claims he had a lack of knowledge regarding Dawn Salvucci. This simply is not substantiated. Here, Plaintiff knew of Dawn Salvucci's existence and role. There was no misimpression regarding her role. **There was nothing in the original pleading evidencing an intent to name Ms. Salvucci as a defendant.** This case is the exact distinction and clarification the Supreme Court was making when comparing the circumstances of *Krupski* and *Nelson*. Ms.

Salvucci was clearly identified as a nurse who cared for Mr. Jackson in the medical record in Plaintiff and his counsel's possession, before the case was initiated, and before the statute of limitations expired.

Plaintiff contends that "Plaintiff became aware of Defendant Salvucci's culpability in Mr. Jackson's death through discovery in this action that occurred after the statute of limitations expired." (*See* Plaintiffs' Opp. to Motion to Dismiss of CCMC, Varacalli and Salvucci at 9.) Plaintiff explains that Dr. Varacalli responded in discovery that: "My understanding is that [sic] nurse whose last name I believe is Salvucci, was advised that the patient was to be arraigned. I do not know the identity of her employer or her address." (*Id.*) Plaintiff also cites another discovery response from Dr. Varacalli noting that Nurse Salvucci informed her of the arraignment. (*Id.* at 10.) Plaintiff also attached a portion of Nurse Salvucci's deposition transcript, where Plaintiff indicates that she testified that she told a physician the patient was going to be arraigned. (*Id.*, Ex. "C".) This is information regarding nurses being involved with Mr. Jackson's care, Mr. Jackson's proposed arraignment, and Nurse Salvucci's role in Mr. Jackson's care and discussion with the physician. This is information that Plaintiff has been aware of, well before the statute of limitations expired. Despite this, no nurse was ever identified in the original Complaint as a named defendant against whom claims were going to be pursued. (*See* Moving Defendants' Motions to Dismiss, Ex. "A", Original Complaint.)

A review of the medical records demonstrates that Plaintiff knew of Nurse Salvucci's identity and knew of her role in Mr. Jackson's care at Crozer-Chester Medical Center. These records had been in Plaintiff's possession since about September 16, 2009, when they were produced by the Hospital in accordance to an "Authorization to Release Medical Records" executed by Plaintiff, Naji Muhammad. (*See* Ex. "1".) A review of the medical records shows

that they contained all of the information that Plaintiff's now claim was first learned through discovery.

Most notable is a very legible and handwritten progress note authored and signed by Dawn Salvucci. She reports on August 15 at 8:30 p.m.: "State trooper at bedside notified me that a judge was on his way to the hospital for bedside arraignment + pt needed to be awake. Pt was given narcan and romazicon to reverse fentanyl + Ativan affect. Pt given narcan x's 4 does + romazicon x 4 doses." (See Ex. "2" at Bates No. "Jackson 0232.") The pertinent portion of the medical records produced by Plaintiff with his Initial Disclosures and previously received by Plaintiff in response to the executed authorization in September 2009 is reproduced below for the Court's consideration:

CROZER KEYSTONE HEALTH SYSTEM		10011986972 JACKSON, HAKIMI B M XXX-XX-2621 MED TC CA 08/14/09 CHH ERHAGE
PROGRESS NOTES		PLEASE IN PRINT ADDRESS OR PHOTO PLATE ON BOTH SIDES OF FORM
DATE	TIME (MILITARY)	NOTE PROGRESS OF CASE, COMPLICATIONS, CHANGE IN DIAGNOSIS, CONDITION OF DISCHARGE, INSTRUCTIONS TO PATIENT
8-15-09	2030	NSG: Pt. sedated w/ fentanyl 25mcg & Ativan 1mg around 8:30 am. Pt. was rearing & pulling @ restraints. State trooper at bedside notified me that a judge was on his way to the hospital for bedside arraignment & pt. needed to be awake. Pt. was given narcan & romazicon to reverse fentanyl & ativan affect. Pt. given narcan x's 4 doses & romazicon x 4 doses. Pt. did not respond.

(Exhibit "2" at Bates No. "Jackson 0232". The note is two pages long, and Dawn Salvucci's signature appears on the second page:

Stable at this time. D. Salvucci

(*Id.* at Bates No. “Jackson 0233”.) Dr. Varacalli prepared a Discharge Note which is quoted below:

Throughout his hospitalization state troopers were present at his bedside as he was in custody. These police officers then informed nursing that a judge was on his way to the hospital for a beside arraignment and the patient needed to be awake. The patient was then given Narcan and flumazenil. However, the patient did not respond.

(*Id.* at Bates “Jackson 0038”).¹ Finally, Nurse Salvucci is referenced by signature and/or initials on no less than eight (8) physician order sheets (Ex. “2” at Bates Nos. “Jackson 0051-53, 0063-0067), four (4) transfusion request records (*id.* at Bates Nos. “Jackson 0082-0085”), three pages of patient care flowsheets (*id.* at Bates Nos. “Jackson 0104-0106”), and at the end of a two progress notes (*id.* at Bates Nos. “Jackson 0228, and 0232-0233”).² These documents show who Dawn Salvucci is, and what her role was in Mr. Jackson’s care. The “Patient Care Flowsheet”, for example, identifies Dawn Salvucci’s signature and her initials, and shows that Dawn Salvucci was the nurse caring for the patient, who completed information on the flow sheet on August 15, 2009 between 8:00 a.m. through 4:00 p.m. (See Exhibit “2” at “Jackson 0104-0106”).

While Plaintiff argues his discovery revealed information not previously accessible to him, this is not supported by the records. By comparing what Plaintiff claims he learned in discovery with the medical records available to him for two years, it is quite clear that Plaintiff

¹ Please note that all other irrelevant entries in this note have been redacted for purposes of this motion but will be made available for the Court’s review (along with any other portion of the medical chart), in camera, if so requested by the Court.

² Please note counsel has added markings to allow the Court to easily identify the signatures and initials counsel is referring the court to. Again, irrelevant entries have been redacted for purposes of this motion but will be made available for the Court’s review (along with any other portion of the medical chart), in camera, if so requested by the Court.

was well aware of information regarding the nursing care and role of Ms. Salvucci far before the statute of limitations expired.

Thus, there was no mistake. Plaintiff made a decision not to sue the nurses involved with Mr. Jackson's care. This is not a situation where there was a mistake of misidentification or misnomer with respect to Dawn Salvucci. Plaintiff does not argue this to be the case, and it is apparent from the pleadings that Plaintiff did not mistakenly name somebody else (such as a "John Doe Nurse" or a different Crozer-Chester nurse) with the intention of suing Dawn Salvucci. This also is not a situation where there is a lack of knowledge constituting a mistake.

The requirements of Rule 15(c)(1)(C) have not been satisfied and Plaintiff's claims against Dawn Salvucci must be dismissed as barred by the statute of limitations. Based on this and the legal arguments set forth in the Motions to Dismiss, Moving Defendants respectfully request that this Honorable Court grant their motions and provide all the requested relief.³

DATED: Jan. 20, 2012

BY:



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SALVUCCI, R.N., and HUSSEIN
KILIDDAR, M.D.*

³ While Moving Defendants make additional arguments for dismissal in their motions that Plaintiff has opposed, Moving Defendants will rest on the strength of their moving papers to refute Plaintiff's argument.

CERTIFICATE OF SERVICE

I, A. Bryan Tomlinson, counsel for Defendants, CROZER-CHESTER MEDICAL CENTER, KRISTIN VARACALLI, M.D., HUSSEIN KILIDDAR, M.D., AND DAWN SALVUCCI, R.N. hereby certify that a copy of the within Motion for Leave to file a Reply was electronically filed with the Court and served electronically by the Court and/or served via First Class U.S. Mail, postage-prepaid, upon counsel of record:

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Kathleen Kirkpatrick, Esquire
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DATED: *Jan. 20, 2012*

BY: 

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**ATTORNEYS FOR DEFENDANTS,
CROZER CHESTER MEDICAL CENTER
KRISTIN VARACALLI, D.O., HUSSEIN
KILIDDAR, M.D. AND DAWN SALVUCCI,
R.N.**

Exhibit “1”

(Authorization Executed by Plaintiff for
Release of Medical Records)

CROZER
KEYSTONE
HEALTH SYSTEM

CCMC
DCMH
Taylor
CKHN

Springfield

Dr.

Killickar

6/25

8/14 - 8/16/09

19/44

expired

Authorization to Release Medical Records:

Patient Name: Hakim Karim Jackson Date: 8-17-09

Social Security Number: _____ Date of Birth: SEP

Phone Number (w/ area code): 267-972-0917

I authorize a copy of my health records be sent to:

Name: Naji Q. Muhammad

Address: _____

Medical Records to be copied and Date(s) of Service 8/14/09

- ☒ Complete medical record (Inpatient, outpatient, Emergency)
☐ Laboratory ☐ Pathology
☐ Radiology (report, film) ☐ Slides
☐ Operative Report ☐ Cath Films
☐ Discharge Summary
☐ Other: _____

Special Authorization, Please Read: I DO NOT give my express permission for the following information to be copied and disclosed. (please check and initial)

- | | | | |
|---|------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> HIV related information | <input type="checkbox"/> BILL TYPE | <input type="checkbox"/> INFORMATION RELEASED | <input type="checkbox"/> TRANSACTION# |
| <input type="checkbox"/> Alcohol/Drug Treatment Information | <input type="checkbox"/> APB | <input type="checkbox"/> D/S | <input type="checkbox"/> ENUG |
| <input type="checkbox"/> Mental Health | <input type="checkbox"/> DDB | <input type="checkbox"/> H&P | <input type="checkbox"/> LAB |
| <input type="checkbox"/> Psychotherapy Notes | <input type="checkbox"/> H&P/NB | <input type="checkbox"/> CONSULT | <input type="checkbox"/> RADIOLOGY |
| | <input type="checkbox"/> LGL (CC#) | <input type="checkbox"/> OP REPT | <input type="checkbox"/> EEG/ENG/EKG |
| | <input type="checkbox"/> PATIENT | <input type="checkbox"/> PATH/CYTOL | <input type="checkbox"/> ECHO/STRESS |
| | <input type="checkbox"/> PROJECT | <input type="checkbox"/> ADMIT NOTE | <input type="checkbox"/> P/SYOT |
| | <input type="checkbox"/> STANDARD | <input type="checkbox"/> ITW | <input type="checkbox"/> M&M/GROWTH |
| | <input type="checkbox"/> INDICATES | <input type="checkbox"/> MED/PROBLEM | <input type="checkbox"/> NB REC |
| | <input type="checkbox"/> W/ AUTH | <input type="checkbox"/> PSYCH/ACCA | <input type="checkbox"/> IN/RE RECORD |
| | <input type="checkbox"/> DATE | <input type="checkbox"/> MISC | |

Purpose of Release: the reason I am asking my records to be copied and sent is:

For my Records (Father's)

Naji Muhammad 210 pgs.

Please Read and Sign Below

- I may read or copy any information used or disclosed under this authorization. I understand that I may ask for a copy of this signed form
- I understand there is a charge for copies of records not sent directly to a health care provider.

Please also complete and read and sign the other side

Jackson 0041

Exhibit “2”

(Pertinent Portions of CCMC Medical
Records Produced by Plaintiff)

CROZER-KEYSTONE PATIENT: JACKSON, HAKIMI
HEALTH SYSTEM

MED REC NO: _____

CROZER

SUMMARY OF DISCHARGE
PAGE 3

Redacted

Throughout his hospitalization state troopers were present at his bedside as he was in custody. These police officers then informed nursing that a judge was on his way to the hospital for a bedside arraignment and the patient needed to be awake. The patient was then given Narcan and flumazenil to reverse the fentanyl and Ativan effects. He was given four doses of Narcan and five doses of flumazenil. However, the patient did not respond. The

Redacted.

Jackson 0038

CROZER-KEYSTONE PATIENT: JACKSON, HAKIMI
HEALTH SYSTEM

MED REC NO: 900-32-2621

CROZER

SUMMARY OF DISCHARGE
PAGE 5

Redacted

Signature _____
INTENSIVE CARE SPECIALIST

Date: _____

Dictated by: KRISTIN VARACALLI, DO

Dictated: 08/20/2009

Transcribed: 08/20/2009 7:04 P

Transcriptionist: cro

Doc#: 1384107

Job #: 000468672

cc: INTENSIVE CARE SPECIALIST

One Medical Center Boulevard

POB II Suite 422

Upland PA 19013

Original

Jackson 0040

CROZER
KEYSTONE
HEALTH SYSTEM

PHYSICIAN'S ORDERS



STAT / NOW
(Medications Only)

Jackson, Hakim

100119868732
JACKSON, HAKIM 03221821
XXX-XX-2621
09/11/09 30Y MED
HCSB LOCATED TC CA 08/14/09
1A 11/11/09 CHA ERH08

DATE	TIME	TREATMENT STUDIES DIET VITAL SIGNS AMBULATORY PRIVILEGES MEDICATIONS AND IV'S
UNACCEPTABLE ABBREVIATIONS		
Do NOT Use	USE Instead	Do NOT Use
µg, qd or q.d.	mcg or microgram, Every Day or Daily	Never write a zero by itself after a decimal point (e.g., 2.0)
qod or q.o.d.	Every Other Day	Lack of leading zero (e.g., .2)
U	Units, International Unit	MS or M90, X90
IV		Magnesium Sulfate, too mistaken for 100, use ml instead, for 3 doses or for 3 days.
PLEASE CONSIDER RESUSCITATION STATUS		
ALLERGIES:		WEIGHT:
OMT <input type="checkbox"/> INDICATED <input type="checkbox"/> NOT INDICATED		TYPE:
8/15/09 0530	Consult Psych re: drug abuse X ⁸⁹	
8/15/09 0740	Δ Fentanyl 25 mcg 10 Q2 Prn prn	
8/15/09 0858	K. Vancam 1591	
8/15/09	FAXED	
8/15/09	AD: H. 40 2-11 25 (a) 11-None	
<p><i>(Circled Signature)</i> Salvucci RN 8/15/09 1700</p>		

FORM 10 37-000942 (REV 2/09)

Jackson 0051



PHYSICIAN'S ORDERS
RESTRAINTS
ACUTE - LEVEL MEDICAL / SURGICAL CARE

10011986972
JACKSON HAKINI B M
XXX-XX-2621
JOY MED
TC CA 08/14/09
E04A ERH492

INSTRUCTIONS:

1. CROSS OUT, DATE, TIME AND INITIAL ANY ORDER NOT WANTED FOR WHICH THERE IS NO BOX.
2. ANY ORDER WITH A BOX MUST BE CHECKED FOR THE ORDER TO BE CARRIED OUT.
3. FILL IN ALL BLANKS UNLESS IT IS PART OF AN UNCHECKED ORDER.
4. STOPPING OF AN ORDER TO BE WRITTEN AS A SPECIFIC NEW ORDER.
5. REORDERING TO BE WRITTEN AS A SPECIFIC NEW ORDER.

DATE	TIME	TREATMENT/MEDICATION & DIET
DATE/TIME (MILITARY)		A GENERIC EQUIVALENT DRUG MAY BE DISPENSED UNLESS DRUG NAME IS CIRCLED.
8/15/09	1100	<p>1. Apply the following restraint:</p> <p><input checked="" type="checkbox"/> Soft wrist _____ bilateral _____ right _____ left</p> <p><input checked="" type="checkbox"/> Soft ankle _____ bilateral _____ right _____ left</p> <p><input checked="" type="checkbox"/> Hand mitts _____ bilateral _____ right _____ left</p> <p><input type="checkbox"/> Vest <input type="checkbox"/> Non-self release geriatric chair</p> <p><input type="checkbox"/> Belt <input type="checkbox"/> 4 side rails up</p> <p><input type="checkbox"/> Medication _____ dose _____ frequency _____</p> <p>2. Reason for utilization of restraint:</p> <p><input checked="" type="checkbox"/> Patient pulling at tubes or interfering with other devices/treatments</p> <p><input type="checkbox"/> Medically based confusion/agitation -- Impacts safety of care</p> <p><input type="checkbox"/> Other (specify): _____</p> <p><i>K. V. R. 1571</i> (RN signature) <i>1103</i> (time) <i>8/15/09</i> (date)</p> <p>Restraint order expires in 24 hours, unless otherwise ordered for a shorter duration. Restraints MAY NOT be ordered as PRN.</p> <p>Implementation Record (To be completed by RN):</p> <p>1. Conservative methods which were unsuccessful:</p> <p><input type="checkbox"/> Provided diversionary activities.</p> <p><input type="checkbox"/> Encouraged family to remain with patient</p> <p><input type="checkbox"/> Frequent observations</p> <p><input type="checkbox"/> Other _____</p> <p>2. Explanation provided to:</p> <p><input type="checkbox"/> Patient <input type="checkbox"/> Family</p> <p><input type="checkbox"/> Patient unable to understand, family not present</p> <p>3. Restraint applied at <i>0600</i> (time) <i>8/15/09</i> (date) <i>J. V. R. 1571</i> (RN signature) _____ RN</p>

FORM 1004 (REV. 7/09)

Jackson 0052



Adult Critical Care Sedation and Analgesia
PHYSICIAN'S ORDERS

10011986972
JACKSON HAKIMI

09/11/11 XXX-XX-2621

PLACED TO CA 08/16/09
HEIGHT: 191cm, ENH: 68

ALLERGIES:

WEIGHT:

Adult Critical Care Sedation and Analgesia Order Sheet

1. Physician MUST review and discontinue ALL previously ordered sedation and analgesia orders. Discontinue the following medications:

Ativan prn, Fentanyl prn

2. Monitor pain until patient reaches desired level then monitor every 4 hours.

3. Analgesia (May select continuous infusion and as needed breakthrough dosing for either morphine or fentanyl.)

Morphine*

- ☐ Morphine _____ mg IV and followed by _____ mg IV every _____ hour around the clock.
☐ Morphine continuous IV infusion (1mg/ml): Start at _____ mg/hr, may increase infusion by _____ mg/hr titrating every _____ to reach a pain score less than 3. Maximum dose _____ mg/hr, if dose greater than maximum call physician.
☐ Morphine _____ mg IV every _____ hr as needed for breakthrough pain to maintain pain score less than 3.
☐ Morphine _____ mg IV every _____ hr as needed for severe pain (pain score 6-10) to maintain pain score less than 3.
☐ Morphine _____ mg IV every _____ hr as needed for _____

OR

Fentanyl* (preferred for hemodynamically unstable, renal insufficiency Scr > 2, or hepatic insufficiency)

- ☐ Fentanyl _____ mcg IV and followed by _____ mcg IV every hour around the clock.
☒ Fentanyl continuous IV infusion (4mcg/ml): Start at 4 mcg/hr, may increase infusion by 25 mcg/hr titrating every 10 to reach a pain score less than 3. Maximum dose 100 mcg/hr, if dose greater than maximum call physician.
☐ Fentanyl _____ mcg IV every _____ hour as needed for breakthrough pain to maintain a pain score less than 3.
☐ Fentanyl _____ mcg IV every _____ hour as needed for severe pain (pain score 6-10) to maintain a pain score less than 3.
☐ Fentanyl _____ mcg IV every _____ hour as needed for _____

Other _____

4. Sedation Level based on Motor Activity Assessment Score (see ravenna)

☐ Mild Sedation: MAAS 2-3 ☐ Deep Sedation: MAAS 1-2 ☐ Other (specify): _____

5. Monitor sedation until patient reaches desired level then monitor every 4 hours.

6. Sedation (May select continuous infusion and as needed breakthrough dosing for either midazolam or lorazepam.)

Midazolam* (Verso)[®] used for short-term sedation (less than 72 hours)

- ☐ Midazolam scheduled IV: _____ mg every _____ hours
☐ Continuous IV infusion (1mg/ml in D5W): Start Midazolam at _____ mg/hr, increase infusion by _____ mg/hr titrating every _____ to a designated MAAS Sedation Score. Maximum dose _____ mg/hr, if dose greater than maximum call physician.
☐ Midazolam intermittent as needed IV: Midazolam _____ mg every _____ hours as needed for sedation
☐ Midazolam intermittent as needed IV: Midazolam _____ mg every _____ hours as needed for _____

OR

Lorazepam** (Ativan)[®] used for long-term sedation (greater than 72 hours)

- ☐ Lorazepam scheduled IV: _____ mg every _____ hours
☒ Continuous IV infusion (1mg/ml in D5W): Start Lorazepam at 1 mg/hr, increase infusion by 1 mg/hr titrating every 10 to a designated MAAS Sedation Score. Maximum dose 5 mg/hr, if dose greater than maximum call physician.
☐ Lorazepam intermittent as needed IV: Lorazepam _____ mg every _____ hours as needed for sedation
☐ Lorazepam intermittent as needed IV: Lorazepam _____ mg every _____ hours as needed for _____

OR

Propofol (Diprivan)[®] used for short-term sedation (less than 72 hours)

See propofol order sheet

Other _____

7. Wake Up Assessment to be completed daily.

Avoid wake up assessment if $\text{FiO}_2 > 0.8$ or PEEP > 12.

- ☐ Patient's condition does not permit. If unable to be completed on admission to the critical care area, reassess daily to determine if a wake up assessment can be completed.

*For titrating morphine, fentanyl, midazolam and lorazepam infusions, administer a bolus dose prior to increasing the infusion rate.

8/15/09

Date
P&T 7/05
Form 16139 (2005)

1100

Time

K. Vamanti (576)
Physician Signature

Jackson 0053

Salvadori RN
8/15/09
1700



PHYSICIAN'S ORDERS

☐ STAT / NOW
(Medications Only)

10011986972
JACKSON, HAKIMI B M
XXX-XX-2621
09/11/11 JY MED
HOSP: HOSPITALITY TO CA 08/14/09
LA: 11/11/11 LHA CRHA98

DATE	TIME (MILITARY)	TREATMENT STUDIES	DIET	VITAL SIGNS	AMBULATORY PRIVILEGES	MEDICATIONS AND IVS
UNACCEPTABLE ABBREVIATIONS						
Do NOT Use		USE Instead		Do NOT Use		USE Instead
µg, qd or q.d.		mcg or microgram, Every Day or Daily		Never write a zero by itself after a decimal point (e.g. 2.0)		NEVER FOLLOW with a zero after a decimal point
qod or q.o.d.		Every Other Day		Lack of leading zero (e.g. .2)		ALWAYS LEAD with a zero before a decimal point.
U		Units, International Unit		MS or MSO, MB or MBO, CS, X3d		Morphine Sulfate, Magnesium Sulfate, 1cc mistaken for 100, use ml instead, for 3 doses or for 3 days.
PLEASE CONSIDER RESUSCITATION STATUS						
ALLERGIES:				WEIGHT:		
OMT <input type="checkbox"/> INDICATED <input type="checkbox"/> NOT INDICATED				TYPE:		
8/15/05		STAT: Place c/s Surgery re: enter HD on Deter and competent syndrome 4 bicarb to 250 mEq/hr DIC ↑ IVF to 400 ml/hr. Repeat CPK at 15:00 15:00-131 already given				
10:45		0.4mg IV Naloxone @ 2 minutes already given 0.2mg IV Romazicon @ 1 minute, max of 5 doses to wake pt already given OK to resume sedation p/arrangement.				
8/15/05 10:50		Cant. bicarb at 100 mEq/hr r 1 liter. Please hold 2 unit PRBC. R. Varnadi 1571.				
8/15/05 10:51		DIC bicarb at 100 mEq/hr r 1 liter ↑ bicarb to 250 mEq/hr P legel dealing, page respiratory & intubate Vent settings 10/1 A/C 50/20/5 Resp 4 unit PRBC now please Salvador 1571 8/15/05 10:51 R. Varnadi 1571.				

FORM 37-000942 (REV 2/05)

Jackson 0063



PHYSICIAN'S ORDERS

STAT / NOW
(Medications Only)
 10011986972
 JACKSON, HAKIMI B M
 XXX-XX-2621
 09/ RED
 HOSP. ASSIGNED TO CA 08/14/09

DATE	TIME (MILITARY)	TREATMENT, STUDIES, DIET, VITAL SIGNS, AMBULATORY PRIVILEGES, MEDICATIONS AND IVS			
UNACCEPTABLE ABBREVIATIONS					
Do NOT Use		USE Instead		Do NOT Use	
ug, qd or q.d.		mcg or microgram, Every Day or Daily		Never write a zero by itself after a decimal point (e.g. 2.0)	
qd or q.o.d.		Every Other Day		Look of leading zero (e.g. .2)	
U		Units, International Unit		MS or MSO, MB or MgSO, op, X38	
IU				ALWAYS LEAD with a zero before a decimal point, Morphine Sulfate, Magnesium Sulfate, 1cc mistaken for 100, use ml instead, for 3 doses or for 3 days.	
PLEASE CONSIDER RESUSCITATION STATUS					
ALLERGIES: WEIGHT:					
OMT <input type="checkbox"/> INDICATED <input type="checkbox"/> NOT INDICATED TYPE:					
8/15/09	11:15	2 more unit FFP (total 100) #125 Then recheck PT, PTT, INR p transfusion 132/135 K. Vavacani			
<div style="border: 2px solid black; border-radius: 50%; padding: 20px; display: inline-block;"> Salucci RD 8/15/09 1700 </div>					

FORM 97-010842 (REV 2/09)

Jackson 0064

CROZER
KEYSTONE
HEALTH SYSTEM

PHYSICIAN'S ORDERS



STAT / NOW
(Medications Only)

10011986972
JACKSON, HAKIMI B M
XXX-XX-2621
09/30Y MED
HOSP. CERTIFIED TO GA 08/14/09
IA 225 / / ECHA CRHACB

DATE	TIME	TREATMENT, STUDIES, DIET, VITAL SIGNS, AMBULATORY PRIVILEGES, MEDICATIONS AND IV'S
UNACCEPTABLE ABBREVIATIONS		
DO NOT USE	USE Instead	DO NOT USE
µg, qd or q.d.	mcg or microgram, Every Day or Daily	Never write a zero by itself after a decimal point (e.g. 2.0)
qod or q.o.d.	Every Other Day	Lack of leading zero (e.g. .2)
U	Units, International Unit	MB or MSO
IU		MS or MgSO ₄ , co, Xau
		NEVER FOLLOW with a zero after a decimal point
		ALWAYS LEAD with a zero before a decimal point.
		Morphine Sulfate
		Magnesium Sulfate
		1cc mistaken for 100, use ml instead, for 3 doses or for 3 days.
PLEASE CONSIDER RESUSCITATION STATUS		
ALLERGIES:		
OMT <input type="checkbox"/> INDICATED <input type="checkbox"/> NOT INDICATED TYPE:		
8/15/09	11:20	Please call Dr. Danner re: H/O carpal tunnel X142 Please call Dr. Gray re: compartment syndrome X143 K. Varnum 1591.
8/15/09	12:52	2 more unit FFP now (total of 8) X144 VET K long IV 100% norm Eti: Neurosurgery re: hemangioma CT Head STAT re: bleed. X141 K. Varnum 1591.
8/15/09	13:14	CBC: alt, BMP, Hb, Phos, PT, INR, PTT, LFTs OK, Anylase, lipase norm plan. med Ther 060 X145-161 K. Varnum 1591.
8/15/09	13:40	<i>[Signature]</i> 8/15/09 100

CROZER
KEYSTONE
HEALTH SYSTEM

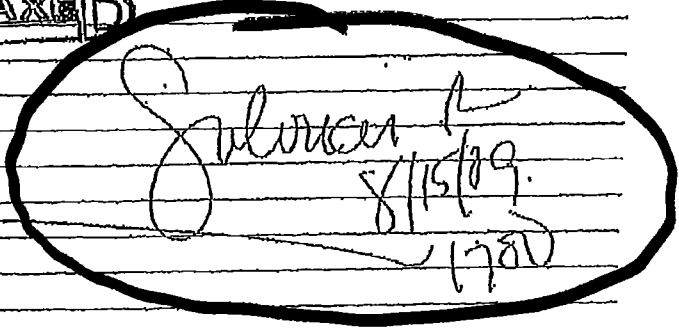
PHYSICIAN'S ORDERS



STAT / NOW
(Medications Only)

10011984972
JACKSON, HAKIMI

09/15/09 11:50 AM
MEDICATIONS
TO CA 08/14/00
FAX 814 98

DATE	TIME	TREATMENT, STUDIES, DIET, VITAL SIGNS, AMBULATORY PRIVILEGES, MEDICATIONS AND IVS
UNACCEPTABLE ABBREVIATIONS		
Do NOT Use	USE Instead	Do NOT Use
mg, qd or q.d.	mg or microgram, Every Day or Daily	Never write a zero by itself after a decimal point (e.g. 2.0)
qod or q.o.d.	Every Other Day	Lack of leading zero (e.g. .2)
U	Units, International Unit	MS or MSG, cc, Xcc
USE Instead		USE Instead
		NEVER FOLLOW with a zero after a decimal point.
		ALWAYS LEAD with a zero before a decimal point.
		Morphine Sulfate, Magnesium Sulfate, 1cc mislabeled for 100, use ml instead, for 8 doses or for 3 days.
PLEASE CONSIDER RESUSCITATION STATUS		
ALLERGIES:		WEIGHT:
OMT <input type="checkbox"/> INDICATED <input type="checkbox"/> NOT INDICATED		TYPE:
8/15/09 15:15	Cannot - Neurology - stat	K. V. Varadachari
8/15/09 16:08	Mannitol 19g IV q6	K. V. Varadachari 1597
8/15/09 16:18	Mannitol 19g IV q6	K. V. Varadachari 1571
FAXED		
		

FORM 37-000941 (REV 2/09)

Jackson 0067

CROZER KEYS
CROZER KEYS TO THE HEALTH SYSTEM
FORM 157-000528 (Rev. 7/08)

TRANSFUSION REQUEST

CCMH - Raymond Vivacqua, M.D.
BH - Harvey Spector, M.D.

DCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loebe, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX/AGE M 30Y		MEDICAL RECORD NUMBER [REDACTED]	
ORDERING PHYSICIAN BARRALL, ELIZABETH M		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]		ACCESSION NUMBER 869291	
ABO/RH A-NEG		ANTIBODY SCREEN NEG		ANTIBODY ID.			
ABO/RH O-NEG		UNIT NUMBER 22GZ39577		COMPATIBILITY COMPAT		UNIT EXPIRATION 08/20/2009	
COMPONENT LP RED CE		VOLUME 250		UNITS / POOL LB		DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BY THEM BEFORE STARTING THIS TRANSFUSION.				DATE GIVEN 8/15/09		VOLUME GIVEN 250	
SIGNATURE ONE <i>[Signature]</i>				TIME STARTED 1300		TIME ENDED 1420	
SIGNATURE TWO <i>[Signature]</i>							
PREVITALS TEMP 98.5 PULSE 113 RESP 20 BP 118/36		1ST HOUR VITALS TEMP PULSE RESP BP		2ND HOUR VITALS TEMP PULSE RESP BP		3RD HOUR VITALS TEMP PULSE RESP BP	
POST INFUSION TEMP PULSE RESP BP							

DETACH

CROZER KEYS TO THE HEALTH SYSTEM
FORM 157-000528 (Rev. 7/08)

TRANSFUSION REQUEST

CCMH - Raymond Vivacqua, M.D.
BH - Harvey Spector, M.D.

DCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loebe, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX/AGE M 30Y		MEDICAL RECORD NUMBER [REDACTED]	
ORDERING PHYSICIAN BARRALL, ELIZABETH M		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]		ACCESSION NUMBER 869291	
ABO/RH A-NEG		ANTIBODY SCREEN NEG		ANTIBODY ID.			
ABO/RH O-NEG		UNIT NUMBER 32GH1.2652		COMPATIBILITY COMPAT		UNIT EXPIRATION 08/19/2009	
COMPONENT LP RED CE		VOLUME 250		UNITS / POOL JW		DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BY THEM BEFORE STARTING THIS TRANSFUSION.				DATE GIVEN 8/15/09		VOLUME GIVEN 250	
SIGNATURE ONE <i>[Signature]</i>				TIME STARTED 1730		TIME ENDED 2000	
SIGNATURE TWO <i>[Signature]</i>							
PREVITALS TEMP 98.4 PULSE 88 RESP 17 BP 124/40		1ST HOUR VITALS TEMP PULSE 98 RESP BP 122/47		2ND HOUR VITALS TEMP PULSE RESP BP		3RD HOUR VITALS TEMP PULSE RESP BP	
POST INFUSION TEMP PULSE RESP BP							

DETACH

CROZER KEYS TO THE HEALTH SYSTEM
FORM 157-000528 (Rev. 7/08)

TRANSFUSION REQUEST

CCMH - Raymond Vivacqua, M.D.
BH - Harvey Spector, M.D.

DCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loebe, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX/AGE M 30Y		MEDICAL RECORD NUMBER [REDACTED]	
ORDERING PHYSICIAN INTENSIVE CARE SPECI		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]		ACCESSION NUMBER 870183	
ABO/RH A-NEG		ANTIBODY SCREEN		ANTIBODY ID.			
ABO/RH A-POS		UNIT NUMBER 22KH48478FTP1		COMPATIBILITY		UNIT EXPIRATION 08/15/2009	
COMPONENT 24 HOUR T		VOLUME 306		UNITS / POOL SS		DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BY THEM BEFORE STARTING THIS TRANSFUSION.				DATE GIVEN 8/15/09		VOLUME GIVEN 306	
SIGNATURE ONE <i>[Signature]</i>				TIME STARTED 2041		TIME ENDED 2050	
SIGNATURE TWO <i>[Signature]</i>							
PREVITALS TEMP 95.5 PULSE 87 RESP 20 BP 78/46		1ST HOUR VITALS TEMP 95.5 PULSE 86 RESP 20 BP 78/43		2ND HOUR VITALS TEMP PULSE RESP BP		3RD HOUR VITALS TEMP PULSE RESP BP	
POST INFUSION TEMP PULSE RESP BP							

DETACH

Jackson 0082

CROZED

FROZEN KEYSTONE HEALTH SYSTEM
FORM #J7-001480 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Viqueza, M.D.
SH - Harvey Specter, M.D.CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Lopez, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO/RH A-NEG		ANTIBODY SCREEN		ANTIBODY ID.	
ABO/RH A-POS		UNIT NUMBER 42W63309FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009	CROSSMATCH EXPIRATION
COMPONENT 24 HOUR T	VOLUME 191	UNITS / POOL	TECH JW	DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD TYPE BEFORE STARTING THIS TRANSFUSION. SIGNATURE ONE <i>Salvador</i>		DATE GIVEN 8/15/09	VOLUME GIVEN 191	COMMENTS #1	
SIGNATURE TWO <i>Allen</i>		TIME STARTED 1245	TIME ENDED 1250		
PREVITALS TEMP 96.3 PULSE 122	15 MIN VITALS TEMP PULSE	1ST HOUR VITALS TEMP PULSE	2ND HOUR VITALS TEMP PULSE	3RD HOUR VITALS TEMP PULSE	POST INFUSION TEMP PULSE 117

DETA

FROZEN KEYSTONE HEALTH SYSTEM
FORM #J7-001480 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Viqueza, M.D.
SH - Harvey Specter, M.D.CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Lopez, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO/RH A-NEG		ANTIBODY SCREEN		ANTIBODY ID.	
ABO/RH A-POS		UNIT NUMBER 22FQ83252FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009	CROSSMATCH EXPIRATION
COMPONENT 24 HOUR T	VOLUME 258	UNITS / POOL	TECH JW	DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD TYPE BEFORE STARTING THIS TRANSFUSION. SIGNATURE ONE <i>Salvador</i>		DATE GIVEN 8/15/09	VOLUME GIVEN 258	COMMENTS #2	
SIGNATURE TWO <i>Allen</i>		TIME STARTED 1250	TIME ENDED 1300		
PREVITALS TEMP 96.3 PULSE 122 RESP 20 BP 115/40	15 MIN VITALS TEMP PULSE RESP BP	1ST HOUR VITALS TEMP PULSE RESP BP	2ND HOUR VITALS TEMP PULSE RESP BP	3RD HOUR VITALS TEMP PULSE RESP BP	POST INFUSION TEMP PULSE 111 RESP 80 BP 118/34

DETACH AND CENTER ON REPORT ON TAP

FROZEN KEYSTONE HEALTH SYSTEM
FORM #J7-001480 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Viqueza, M.D.
SH - Harvey Specter, M.D.CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Lopez, M.D.

PATIENT NAME JACKSON, HAKIMI		LOCATION MICU-3		SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI		ATTENDING PHYSICIAN INTENSIVE CARE SPECI		ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO/RH A-NEG		ANTIBODY SCREEN		ANTIBODY ID.	
ABO/RH A-POS		UNIT NUMBER 22FL03678FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009	CROSSMATCH EXPIRATION
COMPONENT 24 HOUR T	VOLUME 242	UNITS / POOL	TECH JW	DATE 08/15/2009	
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD TYPE BEFORE STARTING THIS TRANSFUSION. SIGNATURE ONE <i>Salvador</i>		DATE GIVEN 8/15/09	VOLUME GIVEN 242	COMMENTS #3 Jackson 0083	
SIGNATURE TWO <i>Allen</i>		TIME STARTED 1300	TIME ENDED 1312		
PREVITALS TEMP 110 PULSE 110 RESP 20 BP 122/43	15 MIN VITALS TEMP PULSE RESP BP	1ST HOUR VITALS TEMP PULSE RESP BP	2ND HOUR VITALS TEMP PULSE RESP BP	3RD HOUR VITALS TEMP PULSE RESP BP	POST INFUSION TEMP PULSE RESP BP

DETACH

CRK

PROZER KEYSTONE HEALTH SYSTEM
FORM 037-00025 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Vivasquez, M.D.
SH - Harvey Spector, M.D.

CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loane, M.D.

PATIENT NAME JACKSON, HAKIMI	LOCATION MICU-3	SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI	ATTENDING PHYSICIAN INTENSIVE CARE SPECI	ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO RH A-NEG	ANTIBODY SCREEN	ANTIBODY ID.	
ABO RH A-NEG	UNIT NUMBER 22FC77614FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009
COMPONENT 24 HOUR T	VOLUME 301	UNITS / POOL	DATE 08/15/2009
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BEFORE STARTING THIS TRANSFUSION.		DATE GIVEN 8/15/09	VOLUME GIVEN 301
SIGNATURE ONE <i>[Signature]</i>		TIME STARTED 1315	TIME ENDED 1330
SIGNATURE TWO <i>[Signature]</i>		COMMENTS #X	
PREVITALS	15 MIN VITALS	1ST HOUR VITALS	2ND HOUR VITALS
TEMP 108	TEMP 108	TEMP 108	TEMP 108
PULSE 120	PULSE 120	PULSE 120	PULSE 120
RESP 20	RESP 20	RESP 20	RESP 20
BP	BP	BP	BP
POST INFUSION			

DETA

PROZER KEYSTONE HEALTH SYSTEM
FORM 037-00025 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Vivasquez, M.D.
SH - Harvey Spector, M.D.

CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loane, M.D.

PATIENT NAME JACKSON, HAKIMI	LOCATION MICU-3	SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI	ATTENDING PHYSICIAN INTENSIVE CARE SPECI	ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO RH A-NEG	ANTIBODY SCREEN	ANTIBODY ID.	
ABO RH A-NEG	UNIT NUMBER 22LC71063FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009
COMPONENT 24 HOUR T	VOLUME 240	UNITS / POOL	DATE 08/15/2009
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BEFORE STARTING THIS TRANSFUSION.		DATE GIVEN 8/15/09	VOLUME GIVEN 240
SIGNATURE ONE <i>[Signature]</i>		TIME STARTED 1330	TIME ENDED 1350
SIGNATURE TWO <i>[Signature]</i>		COMMENTS #5	
PREVITALS	15 MIN VITALS	1ST HOUR VITALS	2ND HOUR VITALS
TEMP 105	TEMP 105	TEMP 105	TEMP 105
PULSE 105	PULSE 105	PULSE 105	PULSE 105
RESP 20	RESP 20	RESP 20	RESP 20
BP	BP	BP	BP
POST INFUSION			

DETA

PROZER KEYSTONE HEALTH SYSTEM
FORM 037-00025 (Rev. 7/08)

TRANSFUSION REQUEST

CCMO - Raymond Vivasquez, M.D.
SH - Harvey Spector, M.D.

CCMH - Lawrence Matthews, M.D.
TAYLOR - Jeffrey Loane, M.D.

PATIENT NAME JACKSON, HAKIMI	LOCATION MICU-3	SEX / AGE M 30Y	MEDICAL RECORD NUMBER [REDACTED]
ORDERING PHYSICIAN INTENSIVE CARE SPECI	ATTENDING PHYSICIAN INTENSIVE CARE SPECI	ACCOUNT NUMBER [REDACTED]	ACCESSION NUMBER 869845
ABO RH A-NEG	ANTIBODY SCREEN	ANTIBODY ID.	
ABO RH A-POS	UNIT NUMBER 22FL03680FFP1	COMPATIBILITY	UNIT EXPIRATION 08/16/2009
COMPONENT 24 HOUR T	VOLUME 207	UNITS / POOL	DATE 08/15/2009
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BEFORE STARTING THIS TRANSFUSION.		DATE GIVEN 8/15/09	VOLUME GIVEN 207
SIGNATURE ONE <i>[Signature]</i>		TIME STARTED 1350	TIME ENDED 1400
SIGNATURE TWO <i>[Signature]</i>		COMMENTS #6 Jackson 0084	
PREVITALS	15 MIN VITALS	1ST HOUR VITALS	2ND HOUR VITALS
TEMP 108	TEMP 108	TEMP 108	TEMP 108
PULSE 108	PULSE 108	PULSE 108	PULSE 108
RESP 20	RESP 20	RESP 20	RESP 20
BP	BP	BP	BP
POST INFUSION			

CRH
UNION KEYSTONE HEALTH SYSTEM
FORM 137-000525 (Rev. 7/00)

TRANSFUSION REQUEST

COMO - Raymond Viracque, M.D.
BH - Harvey Epsker, M.D.

DCMH - Lawrence Melhams, M.D.
TAYLOR - Jeffrey Leese, M.D.

PATIENT NAME	JACKSON, HAKIMI		LOCATION	MICU-3		SEX/AGE	M 30Y		MEDICAL RECORD NUMBER	[REDACTED]	
ORDERING PHYSICIAN	INTENSIVE CARE SPECI		ATTENDING PHYSICIAN	INTENSIVE CARE SPECI		ACCOUNT NUMBER	[REDACTED]		ACCESSION NUMBER	869877	
ABO/RH	A-NEG		ANTIBODY SCREEN			ANTIBODY ID.					
ABO/RH	A-POS		UNIT NUMBER	22KF97725FFP1		COMPATIBILITY			UNIT EXPIRATION	08/16/2009	
COMPONENT	24 HOUR T		VOLUME	333		UNITS/POOL			TECH	JW	
			DATE	08/15/2009							
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BEFORE STARTING THIS TRANSFUSION.			SIGNATURE ONE	[Signature]		DATE/TIME	8/15/09 1545		VOLUME GIVEN	333	
			SIGNATURE TWO	[Signature]		DATE/TIME	1600		COMMENTS	#7	
PREVITALS	1ST HOUR VITALS		2ND HOUR VITALS		3RD HOUR VITALS		POST INFUSION				
TEMP	TEMP		TEMP		TEMP		TEMP				
PULSE	PULSE		PULSE		PULSE		PULSE				
RESP	RESP		RESP		RESP		RESP				
BP	BP		BP		BP		BP				

UNION KEYSTONE HEALTH SYSTEM
FORM 137-000525 (Rev. 7/00)

TRANSFUSION REQUEST

COMO - Raymond Viracque, M.D.
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PATIENT NAME	JACKSON, HAKIMI		LOCATION	MICU-3		SEX/AGE	M 30Y		MEDICAL RECORD NUMBER	[REDACTED]	
ORDERING PHYSICIAN	INTENSIVE CARE SPECI		ATTENDING PHYSICIAN	INTENSIVE CARE SPECI		ACCOUNT NUMBER	[REDACTED]		ACCESSION NUMBER	869877	
ABO/RH	A-NEG		ANTIBODY SCREEN			ANTIBODY ID.					
ABO/RH	A-POS		UNIT NUMBER	22FQ83139FFP1		COMPATIBILITY			UNIT EXPIRATION	08/16/2009	
COMPONENT	24 HOUR T		VOLUME	324		UNITS/POOL			TECH	JW	
			DATE	08/15/2009							
I HAVE VERIFIED THE IDENTITIES OF RECIPIENT AND DONOR BLOOD ITEMS BEFORE STARTING THIS TRANSFUSION.			SIGNATURE ONE	[Signature]		DATE/TIME	8/15/09 1430		VOLUME GIVEN	324	
			SIGNATURE TWO	[Signature]		DATE/TIME	1430		COMMENTS	#8	
PREVITALS	1ST HOUR VITALS		2ND HOUR VITALS		3RD HOUR VITALS		POST INFUSION				
TEMP	TEMP		TEMP		TEMP		TEMP				
PULSE	PULSE		PULSE		PULSE		PULSE				
RESP	RESP		RESP		RESP		RESP				
BP	BP		BP		BP		BP				

DETACH AND CENTER 2nd REPORT ON TAPE

Jackson 0085

DETACH AND CENTER 3rd REPORT ON TAPE

FORM 11 07-001430 (REV. 11/08)

10011986972
JACKSON, MAKIMI B M
[REDACTED] XXX-XX-2624
09/ [REDACTED] 30Y MED
MC [REDACTED] TC CA 08/14/09
1A [REDACTED] ERHA ERHA90

DATE: 7/15/09

FORM #6463 (REV. 4/00)



☐ CCMC
☐ BH
☐ TAYLOR

PATIENT CARE FLOWSHEET

CODE: ✓ Assessment findings as described
 * Assessment findings not as described; see progress note
 NO No change from previous assessment (This code can only be used by the individual who did the prior assessment, and cannot be used for the first assessment of the day)

DATE: 8/15/09

10011488972
 JACKSON, MARINI
 XXX-XX-2621
 08/15/09
 30Y
 H&U
 BORN REGISTERED TO CA 08/14/09
 1A 6K 40

SYSTEMS ASSESSMENT	TIME	0630	0800	1000	1200	1400	1600	1800	2000	2200	2400
NEUROLOGICAL											
age appropriate orientation		✓	✓	n/c	*	n/c	n/c	n/c	K	NC	
awake + alert		✓	✓		*				K		
purposeful movements of all extremities		✓	✓		*				K		
speech clear and coherent		✓	✓		*				K		
no sensory deficits		✓	✓		*				K		
memory intact		*	UTA		UTA				K		
tonicities flat		✓	✓		✓						
reflexes intact			N/A		*						
CARDIOVASCULAR											
color within normal limits		✓	✓	n/c	✓	n/c	n/c	n/c	✓		
capillary refill brisk		✓	✓		✓				✓		
no peripheral edema		*	*		*				K		
no apical / radial deficit		✓	✓		✓				✓		
absence of chest pain		✓	UTA		UTA				✓		
no adventitious sounds		✓	✓		✓				✓		
PULMONARY											
bilateral clear breath sounds		*	*	n/c	*	n/c	n/c	n/c	K		
bilateral, equal chest expansion		✓	✓		✓				✓		
breathing not labored		✓	✓		✓				✓		
no sibilant		✓	✓		✓				✓		
no retractions		✓	✓		✓				✓		
GASTROINTESTINAL											
abdomen soft and non-distended		✓	✓	n/c	✓	n/c	n/c	n/c	✓		
active bowel sounds all quadrants		*	✓		*				K		
abdomen non-tender		✓	*		*				UTA		
absence of nausea/vomiting		✓	✓		✓				✓		
NUTRITIONAL											
sucking effectively		NPO	NPO	n/c	n/c	n/c	n/c	n/c	N/A		
swallows without difficulty		NPO	NPO								
ejects good (at least 1/2 tray)											
tolerated ordered diet											
GENITOURINARY											
bladder not distended		✓	✓	n/c	✓	n/c	n/c	n/c	✓		
urine clear and without sediment		✓	✓		✓				K		
no burning		✓	UTA		UTA				UTA		
absence of pain		✓	UTA		UTA				UTA		
thrush firm					N/A						
normal lochia											
EMOTIONAL / PSYCHOLOGICAL											
affect normal		✓	*	n/c	*	n/c	n/c	n/c	K		
behavior appropriate		✓	*		*				K		
coping appropriately		✓	*		*				K		
family coping appropriately											
EDUCATIONAL @											
receptive to learn		✓	*	n/c	*	n/c	n/c	n/c	K		
patient's family receptive to learn											
INITIALS		MY	DS	DS	DS	DS	DS	DS	DS		

@ Refer to Discharge Record to document discharge / transfer planning and educational content taught.

Jackson 0105

CONSCIOUS SEDATION PAR SCORE				
	PRE SEDATION	30 MIN	60 MIN	
Time				1. Able to move 2. ext. voluntarily / command - 2 3. ext. voluntarily / command - 3 4. ext. voluntarily / command - 4
Activity				5. Able to deep breathe / cough freely - 2 6. Dyspnea of limited breathing - 1 7. Apnea - 0
Resp.				8. BP \pm 20 of Preanesthesia Level - 2 9. BP \pm 20 - 40 of Preanesthesia Level - 1 10. BP \pm 60 of Preanesthesia Level - 0
Circ.				11. Fully awake - 2 12. Awake on calling - 1 13. Not responding - 0
Conso.				14. 20 or less beats - 2 15. Greater than 20 beats - 1 16. Greater than 60 beats - 0
Pulse				17. of Preanesthesia Level
Total				
INIT				DATE: 8/15/09

10011986972

JACKSON, HAKIMI

B M

XXX-XX-2621

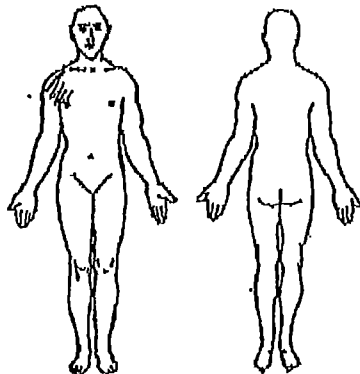
MED

HOSP. AFFILIATED TO CA 08/16/09

1A 6240 / 004...EHA ERH98

SYSTEMS ASSESSMENT (each TIME)	0800	0800	1000	1200	1400	1600	1800	2000	2200	2400
DEVELOPMENTAL										
family called / visited			n/c	n/c	n/c	n/c	n/c			N
family dynamics appropriate										
age appropriate behavior	*	*								
INTEGUMENTARY										
good skin turgor	✓	✓								✓
skin dry and intact	✓	✓								✓
moist mucous membranes	✓	✓								✓
no redness	✓	✓								✓
no breakdown	✓	✓								✓
breasts soft & non tender										
INITIALS	JH	DS	DS	DS	DS	DS	DS	DS	DS	DS

TIME		0800	0800	2000	TIME	
WOUND #1	Abrasions	ecchymotic	ecchymotic	ecchymotic	WOUND #3	
TYPE	all over	all over	ecchymotic	ecchymotic	TYPE	
SIZE	body	over 10	ecchymotic	ecchymotic	SIZE	
STAGE/DEPTH		shoulder	ecchymotic	ecchymotic	STAGE/DEPTH	
EXUDATE			ecchymotic	ecchymotic	EXUDATE	
ODOR			ecchymotic	ecchymotic	ODOR	
S/SX INFECTION			ecchymotic	ecchymotic	S/SX INFECTION	
WOUND #2					WOUND #4	
TYPE					TYPE	
SIZE					SIZE	
STAGE/DEPTH					STAGE/DEPTH	
EXUDATE					EXUDATE	
ODOR					ODOR	
S/SX INFECTION					S/SX INFECTION	
INITIALS					INITIALS	



* IDENTIFY WOUND SITE BY NUMBER ON MAN.

WOUND CARE INTERVENTIONS
(All entries need to be listed and signed)

POD #

Jackson 0106

FORM 10403 (REV. 4/00)



10011986972
JACKSON HAKIMI
B M
XXX-XX-2621
30Y MED
HOSP. INDICATED TO CA 06/14/09
IA 0000 / / HA 0000

PROGRESS NOTES

PLEASE IMPRINT ADDRESSOGRAPH PLATE ON BOTH SIDES OF FORM

DATE	TIME (MILITARY)	NOTE PROGRESS OF CASE, COMPLICATIONS, CHANGE IN DIAGNOSIS, CONDITION OF DISCHARGE, INSTRUCTIONS TO PATIENT
8-15-09	0900	NSG: Rec'd pt. who are in bed c. 52" x 4. State trooper at bedside. Pt. requiring 4 pt. soft restraints.

Redacted

Noted: D. G. Lincee RN

Jackson 0228

CROZER
KEYSTONE
 HEALTH SYSTEM

10011986972
 JACKSON, HAKIMI B M
 XXX-XX-2621
 30Y MED
 TC CA 02/14/09
 CHA ERHAGE

PROGRESS NOTES

PLEASE IMPRINT ADDRESSOGRAPH PLATE ON BOTH SIDES OF FORM

DATE	TIME (MILITARY)	NOTE PROGRESS OF CASE, COMPLICATIONS, CHANGE IN DIAGNOSIS, CONDITION OF DISCHARGE, INSTRUCTIONS TO PATIENT
8-15-09	2030	Nsg: Pt. sedated w/ fentanyl 25mcg & Ativan 1mg around 8 ³⁰ am. Pt. was moaning & pulling @ restraints. State trooper at bedside notified re that a judge was on his way to the hospital for bedside arraignment & pt. needed to be awake. Pt. was given narcan & fentanyl to reverse fentanyl & ativan effect. Pt. given narcan x 4 dose & fentanyl x 5 doses. Pt. did not respond.

Redacted

Jackson 0232

JACKSON, HAKIMI

8 M

XXX-XX-2621

09/22/1978

30 Y

MED

CLASSIFIED TO CA CB/1A/C9

{ CHA CHASS

Redacted

stable at this time. 1) ⁴⁶glucose

PROGRESS RECORD